24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Senate Conservatives Fund	C C00448696
	0
Check if 24-hour report X 48-hour report New report Amends report filed	on M M / D D / Y Y Y Y Y
Full Name of Payee Senate Conservatives Fund	Date of Public Distribution/Dissemination
	08 / 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO Box 388	Amount
City State Zip Code	259.25
Alexandria VA 22313-0388	Transaction ID: E9D596CB7EC0548B586D Date of Disbursement or Obligation
Purpose of Expenditure IE-Maness-Online Processing Category/ Type	08 / 16 / 2014
Name of Federal Candidate Support Office	e Sought: House District:
Robert L Maness Oppose	President State: LA
Calendar Year-To-Date Per Election for Office Sought Disbut 2014	ursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
Alliance Strategies Group Inc.	08 / 20 / 2014
Mailing Address 7700 Congress Ave	Amount
Ste 3208	Alloun
City State Zip Code	9416.67
Boca Raton FL 33487-1358	Transaction ID : EF2FA133007D54C2A9AB Date of Disbursement or Obligation
Purpose of Expenditure IE-Maness-Email List Rental Category/ Type	08 / 20 / 2014
Name of Federal Candidate Support Office	e Sought: House District:
Robert L Maness Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought Disburger 163091.37	ursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	9675.92
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	9675.92
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	• • • • • • • • • • • • • • • • • • • •
	08 20 2014
Signature	